



PROGRESS SHEET

	SURFAC	CE WA	ATER		X GRC	DUN	D WATER		116101.0	,
NAME NAME NAME NAME NAME NAME NAME NAME							PHONE NO.		18 1862	
Mr. William T. & Mrs. Kit L. Maris							0-293-2721 wk:734-4505 cell:734-4556 TE ZIP CODE			
ADDRESS 6099 State Route 20						Was)822		
ASSIGNED TO			TELEPHONE NO.				DATE ASSIGN	ED	7.2	
ADDRESS			CITY			STATI	3 Z	IP CO	ODE	
APPLICATION NO. G3-30417		PERMIT NO. CER			CERTIFICA	TIFICATE NO.				
DATE AMENDED		DATE CANCELLED			W.R.I.A.		e River Basin			
			APPL	CATION		vine	KIVEI Dasi	11		
DATE APPLICATION RECEIVED			INITIAL \$10.00 FEE RECEIVED DATE FEE RECEI							
February 9, 2004		X YES NO			2-9-2004 CK No. 9448					
STATEMENT OF ADDITIONAL EXAMINATION FEE \$		DATE SENT			DATE RECEIVED					
DATE RETURNED FOR COMPLET	ON DA			DATE RECEIV	DATE RECEIVED					
APPROVED BY			TEMPORA	RY PER	MIT DATE ISSUED					
APPROVEDBY	1 /	- 4			DATE ISSUEL					
Statesman-Examiner		-	PUBLIC	CATION			-			
APPROVED BY	DATE	APPROVED		DATE NOTICI	Γ		1			
PROTESTED BY & DATE								-		
DATE AFFIDAVIT RECEIVED CHECKED BY			TIME EXPIRED DATE AMENDED NOTICE SENT			ENT	DATE AFFIDA	AVIT	RECEIVED	TIME EXPIRED
		DE	PARTMENT OF F	ISH & G	AME REPORT					
APPROVED	ROVISO				PROTEST					
			EXAM	INATION	1					
DATE EXAMINATION MADE	MADE BY	DATE REPORT OF EXAM			I. WRITTEN		WRITTEN BY		CHECKED BY	
DATE PERMIT FEE REQUESTED			AMOUNT DUE				DATE RECEIV	/ED		
	PERMIT						_			
PERMIT APPROVED BY DATE APPROVED			PERMIT NO.				DATE ISSUED			
			BEGINNING OF	CONSTR	RUCTION					
DATE NOTICE SENT	DATE FILED					EXTENSION FEE				
EVTENDED TO				EVTEN	IDED TO					
EXTENDED TO				EXIEN	NDED TO					
	W	ELL DE	RILLER'S AND/O			PORT				
DATE SENT				DATE	FILED					
DATE NOTICE SENT			COMPLETION O	F CONST	RUCTION		EVERIGION	TEP.		
DATE NOTICE SENT		DATE	FILED				EXTENSION I	PEE		
EXTENDED TO			2		EXTENDED TO					
			PROOF OF AI	PPROPRI	ATION					
DATE SENT	DATE FILED	DATE FILED			ISION FEE		EXTENDED TO			
DATE CERT. FEE REQUESTED	TED AMOUNT DUE DA			D	DATE APPRO	FOR CERTIFIC.	TIFICATE APPROVED BY			
				ICATION	N					
PROOF EXAM REQUIRED ☐ YES ☐ NO		CERT	IFICATE NUMBER	3			DATE ISSUED)		

CC: Tribal Resources Department

Spokane Tribe P.O. Box 100

Wellpinit, Washington 99040